



HAWAII STATE ETHICS COMMISSION  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
Okimoto	Alan	Susumu	833-0713
MAILING ADDRESS (Street)			FAX
2850 Paa Street, Suite 204			833-8486
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96819	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

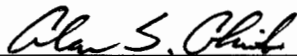
<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Transportation Association		833-6628
MAILING ADDRESS (Street)		FAX
2850 Paa Street, Suite 204		833-8486
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96819
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Lynn Shimizu		833-6628
MAILING ADDRESS (Street)		FAX
2850 Paa Street, Suite 204		833-8486
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96819

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

Agriculture	Education	Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input checked="" type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
Culture, Arts, Historic Preservation	Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

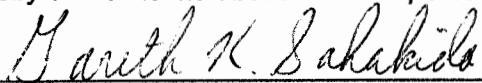
  
(Signature of Lobbyist)

January 7, 2005  
(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Gareth K. Sakakida		Managing Director	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaii Transportation Association		833-6628	
MAILING ADDRESS (Street)		FAX	
2850 Paa Street, Suite 204		833-8486	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96819	

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

  
(Signature of Authorizing Officer or Person Represented)

January 7, 2005  
(Date)